



SEP-07-2004 TUE 01:56 PM CONLEY ROSE &amp; TAYON

FAX NO. 5127031250

P. 01

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35617 7590 06/10/2004

CONLEY ROSE, P.C.  
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September 7, 2004

Date

Kevin L. Daffer

APPLICATION NO.	FILING DATE	FIRST NAMES INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/661,666	09/14/2000	Jianmin Qiao	5298-04100	9202

TITLE OF INVENTION: METHOD OF FORMING SELF ALIGNED CONTACTS

APP. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1,330.00	\$0.00	\$1,330.00	09/10/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
Pham, Thanhha S.	2813	438-700.000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Kevin L. Daffer

2 Conley Rose P.C.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE: Cypress Semiconductor Corp.

(B) RESIDENCE (CITY &amp; STATE OR COUNTRY): San Jose, CA

Please check the appropriate assignee category indicated below (will not be printed on the patent): ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fees are enclosed:

☒ Issue Fee☐ Publication Fee☒ Advance Order - # of Copies 4

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(Authorized Signature)

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9/7/04

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